

## Coeur d'Alene Tribe Legislative Affairs

July II, 2005

The Honorable John McCain Chairman, Senate Committee on Indian Affairs **United States Senate** Washington, D.C. 20510

Senator McCain:

With the Indian Health Care Improvement Act (IHCIA) once again up for reauthorization, the Coeur d'Alene Tribe would like to express our concerns regarding specific elements of the bill and how we are affected locally.

Of significant concern is the Catastrophic Health Emergency Fund (CHEF), and the gross under funding of this particular line item. The CHEF is budgeted at \$18,000 million nationwide and is administered on a first come first served basis

An individual case is not considered catastrophic until it has reached a threshold of \$19,000. as defined in the bill. The 2005 threshold was \$24,700. Once costs exceed the threshold, and, the Health care facility has paid the bill in full, the bill can then be submitted for reimbursement minus the threshold. Early in the fiscal year, chances of reimbursement are good but, once the fund is depleted, historically in the 3<sup>rd</sup> quarter, the Tribes are responsible for the entire cost.

Our year-to-date estimate of catastrophic cases is \$780,000. We did receive reimbursements for \$55,092. As you can see this has a tremendous effect on our overall budget. As a result we find ourselves being forced to make some judgment calls on whom **not** to serve.

Another issue that we need to address is the recruitment and retention of medical professionals. Although the HIS scholarship is a tool for recruitment it does not adequately address retention. We find ourselves in a cycle of searching for dentists, hiring, and then once again searching.

Another significant factor of what makes our facility successful is the Medicaid and Medicare third party billing and we find it essential that they remain intact.

Also of concern is the allocations received by the Urban facilities. While we realize the service they provide, we also believe that until Tribal governments are funded at 100%, the urban programs should be working with Tribes to secure their funding.

In closing, I would like to state that we strongly believe that Health Care is a Trust Responsibility and that it should be funded as an entitlement and not working on continuing resolutions year after year waiting for annual appropriations.

Sincerely,

Allan, Chairman f J Allan, Chairman

Coeur d'Alene Tribe